


U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN
See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF DEMETRIUS BROWN	COURT CASE NUMBER 1:04-cv-379E
DEFENDANT JOHN J. LAMANNA, WARDEN	TYPE OF PROCESS SUMMONS

SERVE  **AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
JOHN J. LAMANNA

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
Federal Correctional Institution McKean, P.O. Box 5000,
Bradford, Pennsylvania 16701

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:

☐ Demetrius Brown
Reg. No. 21534-039
FCI RayBrook
P.O. Box 9001
RayBrook, NY. 12977

Number of process to be served with this Form - 285	1
Number of parties to be served in this case	9
Check for service on U.S.A.	X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold The Defendant is hereby summoned and required to serve upon Plaintiff, Demetrius Brown, *Fold* whose address is stated above, an answer to the complaint which is herewith served upon you, within 60 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. The nature of this action is a Tort Claim for personal injuries suffered due to ETS in which relief is for ten million dollars; filed with the Clerk of Court for the Western District of Pennsylvania.

Signature of Attorney or other Originator requesting service on behalf of: <i>Demetrius Brown</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE 11/3/05
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process 5	District of Origin No. 68	District to Serve No. 68	Signature of Authorized USMS Deputy or Clerk <i>SB</i>	Date
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

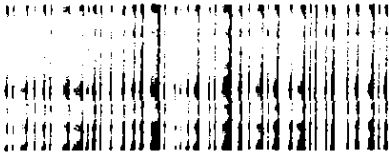
☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode.
Address (complete only if different than shown above)	Date of Service 12/5/05 Time am pm
	Signature of U.S. Marshal or Deputy <i>Demetrius Brown</i>

Service Fee <i>50</i>	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges <i>50</i>	Advance Deposits	Amount owed to U.S. Marshal or <i>75</i>	Amount of Refund
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REMARKS: *cut # 484280204647 12-6-05*

2. Article Number



7160 3901 9842 8020 4697

3. Service Type **CERTIFIED MAIL**

4. Restricted Delivery? (Extra Fee) ☐ Yes

5. Article Addressed to:

**JOHN J. LAMANNA
PCI MCKEAN
P.O. BOX 5000
BRADFORD, PA. 16701**

4-379E, S/C/AC/O, 12/05, SRB

COMMERCIAL SECTION

Signature [Signature]

☒ Agent
☐ Addressee

☐ Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Yes
☐ No

PAID BY ADDRESSEE

PS Form 3811, January 2003

Domestic Return Receipt

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